

JOHN WAIHEE
GOVERNOR



ROBERT P. TAKUSHI
COMPTROLLER

LLOYD I. UNEBASAMI
DEPUTY COMPTROLLER

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING
AND GENERAL SERVICES

P.O. BOX 119
HONOLULU, HAWAII 96810-0119

AUG 24, 1994

COMPTROLLER'S MEMORANDUM NO. 1994-26

TO: Heads of Departments

ATTN: Administrative and Fiscal Officers

FROM: Robert P. Takushi, Comptroller

SUBJECT: Revised Application for Investments, SAFORM A-30

This is to inform departments that a revised Application for Investments, SAFORM A-30 will be implemented on September 1, 1994. The new form will be available from the State Procurement Office (formerly DAGS, Central Purchasing) starting from that date. The remaining quantities of the old form may be used until February 28, 1995. After this date, only the revised form will be accepted by Central Accounting.

Attached for your information is a sample copy of the revised form with the specific changes described below:

APPLICATION FOR INVESTMENTS, SAFORM A-30

1. Under item 9, added "TREASURY SECURITY" for choice number 3.
2. Under the same item as above, changed "OTHER" to be choice number 4.
3. Under item 12, deleted choice 03 for "FIRST INTERSTATE BANK".
4. Under the same item as above, deleted choice 07 for "LIBERTY BANK".

show copy sent to PMS-5

5. Under the same item as above, changed choice 23 to "BANK OF AMERICA, F.S.B."
6. Under the same item as above, deleted choice 25.
7. Under the same item as above, deleted choice 27 for "1st NATIONWIDE BANK, A.F.S.B."
8. Under the same item as above, added "FINANCE FACTORS, LIMITED" for choice 29.
9. Under the same item as above, added "RAINBOW FINANCIAL CORP." for choice 30.
10. Under the same item as above, below choice 30, added a "□".
11. Changed revision date to September 1, 1994 (REVISED).

Should there be any questions regarding this memorandum, please call Dona Kang of our Systems Accounting Branch at 586-0610.



ROBERT P. TAKUSHI
Comptroller

Attachment

APPLICATION FOR INVESTMENTS

TYPE OR PRINT		FOR B & F USE ONLY: <input type="checkbox"/> CORRECTION													
1. REQUESTING AGENCY - DEPT.		2. REQUESTING AGENCY - DIVISION													
		3. REQUEST DATE MM DD YY													
4. AMOUNT OF PURCHASE		5. INVESTMENT PERIOD MM DD YY FROM TO MM DD YY													
6A. APPROPRIATION TO BE CHARGED		6B. ACCOUNT CODE TO BE CHARGED													
		SFX	TC	F	YR	APP	D	ALLOT CAT	COST CENTER	PROJECT NUMBER PH		DEPT ACT	SUBSIDIARY LEDGER A/C	AMOUNT	
		XX	XXX	X	XX	XXX	XX	XX	XXXX	XXXXXX	XX	XXX	XXXXXX	XXXXXXXXXX	XX
7A. INTEREST TO BE CREDITED		7B. ACCOUNT CODE TO BE CREDITED													
A NEW APPLICATION WILL BE FILED WITH THE DIRECTOR OF FINANCE PRIOR TO THE MATURITY DATE OF THE INVESTMENT; OTHERWISE IT IS AGREED THAT THE PRINCIPAL AND INTEREST WILL BE DEPOSITED IN A COMMERCIAL ACCOUNT.															
8. WE CERTIFY THAT THERE ARE SUFFICIENT FUNDS IN THE APPROPRIATION TO BE CHARGED FOR THE PURPOSE OF THE ACTION REQUESTED HEREIN.															
SIGNATURE: FISCAL OFFICER												DATE			
FOR DIRECTOR OF FINANCE USE ONLY															
9. KIND OF PURCHASE (Check One Only)								10. NUMBER				11. INTEREST RATE			
1 <input type="checkbox"/> TIME CERTIFICATE OF DEPOSIT															
2 <input type="checkbox"/> REPURCHASE AGREEMENT															
① 3 <input type="checkbox"/> TREASURY SECURITY															
② 4 <input type="checkbox"/> OTHER															
12.															
01 <input type="checkbox"/> BANK OF HAWAII							21 <input type="checkbox"/> AMERICAN SAVINGS BANK, F.S.B.								
02 <input type="checkbox"/> FIRST HAWAIIAN BANK							22 <input type="checkbox"/> FIRST FED. SAVINGS & LOAN ASSN. OF AMERICA								
③ 04 <input type="checkbox"/> CENTRAL PACIFIC BANK							⑤ 23 <input type="checkbox"/> BANK OF AMERICA, F.S.B.								
05 <input type="checkbox"/> CITY BANK							24 <input type="checkbox"/> INT'L SAVINGS & LOAN ASSN., LTD.								
06 <input type="checkbox"/> HAWAII NATIONAL BANK							⑥ 26 <input type="checkbox"/> PIONEER FED. SAVINGS BANK								
④ 08 <input type="checkbox"/> BANK OF HONOLULU							⑦ 28 <input type="checkbox"/> TERRITORIAL SAVINGS & LOAN ASSOCIATION								
09 <input type="checkbox"/>							⑧ 29 <input type="checkbox"/> FINANCE FACTORS, LIMITED								
							⑨ 30 <input type="checkbox"/> RAINBOW FINANCIAL CORP.								
							⑩ <input type="checkbox"/>								
13. REMARKS										16. COMPTROLLER					
										DATE		NUMBER			
										MM DD YY	XXXXXXXX				
EXECUTED AS APPLIED FOR										15. DATE OF ACTION MM DD YY					
SIGNATURE: DEPUTY DIRECTOR OF FINANCE															